

The MT Laboratory Sentinel

Updates from the MT Laboratory Services Bureau
<http://healthlab.hhs.mt.gov/> 02/05/10



Chlamydia & Gonorrhea Testing Recommendations

In January 2009, a national expert workgroup consultation was held at CDC to start the development of new STD Testing Guidelines for Chlamydia, Gonorrhea and Syphilis. Major conclusions from this consultation, which will become part of published guidelines, are:

- Nucleic acid amplification tests (NAATs) are recommended for detection of reproductive tract infections caused by *C. trachomatis* (Ct) and *N. gonorrhoeae* (GC) infections in men and women with and without symptoms.
- Optimal specimen types for nucleic acid amplification tests are first catch urine from men and **vaginal swabs from women**.
- Nucleic acid amplification tests are recommended for the detection of rectal and oropharyngeal infections caused by *C. trachomatis* and *N. gonorrhoeae*. However, these specimen types have not been cleared by the FDA for use with NAATs and laboratories must establish performance specifications to satisfy CMS regulations (493.1253(b)(2)) for CLIA compliance prior to reporting results for patient management.
- Routine repeat testing of nucleic acid amplification test positive screening specimens is not recommended.

Vaginal swabs can be collected by the health professional, or can be patient self-collected in a clinical setting. The full proceedings from this CDC consultation can be found on the Association for Public Health Laboratories webpage at

<http://www.aphl.org/aphlprograms/infectious/std/Pages/stdtestingguidelines.aspx>

Because of this recommendation to replace urine screening in women with vaginal swab screening, the Montana Public Health Laboratory now provides special collection and transport kits for vaginal swabs (orange labels). In addition, unisex swab kits for cervical and urethral swabs (white labels) and urine kits (yellow labels) are provided. Please be sure to order the correct kits. If cervical specimens for Ct and GC are being collected, such as during exams when PAP smears are also collected, be sure to use the unisex swab kits. Vaginal swab kits should only be used to collect vaginal specimens, not cervical specimens.

The Montana Public Health Laboratory is completing the necessary verification studies to perform NAAT rectal and oropharyngeal specimen testing for those populations at risk for infections at those sites. Currently, specimens are being sent to an outside reference laboratory, but we will be offering this testing in the very near future, at the same price as our current NAAT testing, with better turnaround time.

Contact the Montana Public Health Laboratory with any questions about these new testing options at 800-821-7284.

HEPATITIS C Antibody Testing

The Montana Public Health Laboratory continues to perform Hepatitis C antibody testing as a screening tool to detect Hepatitis C infection. In addition, confirmatory testing by RIBA is still available. If you have questions, please contact Denise Higgins at 406-444-3040 or dehiggins@mt.gov.

Exploring the Rivers of Change

ASCLS-MT 2010 Spring Meeting

Doubletree Hotel Missoula Edgewater

Missoula, MT

April 14 - 17, 2010

For program agenda and registration
ascls-montana.asclsregionviii.org/

Numerous educational sessions and workshops will provide an opportunity for clinical laboratory scientists to earn continuing education credits.

Clinical Laboratory Scientists (Medical Laboratory Technologists) are required to earn 14 continuing education units each year under Montana Licensure laws.



IT'S ALL ABOUT US.....

We are facing a national shortage of medical laboratory scientists. Unique solutions to this problem are illuminated in the articles appearing on page 2:

- Montana's Medical Laboratory Science Program Class of 2010
- Miss Iowa is Lab Ambassador
- National Medical Laboratory Professionals Week
- Silly games and serious science mix
- Kids design their own heroes in "Spore" spinoff

Celebrate...



Montana's Medical Laboratory Science Program Class of 2010

Many years of professional dedication and planning have given birth to this program in Montana. The students are graduates of MSU-Bozeman, U of M-Missoula, and Carroll College in Helena.

Following an exhaustive amount of studying the specialty areas of clinical laboratory science, the students conclude their year with practical internships. Within a few months, they will complete their internships in Montana hospital laboratories in Billings at St. Vincent's and Billings Clinic, Bozeman Deaconess, St. James in Butte, Benefis Healthcare in Great Falls, St. Peters in Helena, Community Hospital in Missoula, and St. Luke's in Ronan.

You have an opportunity to meet and congratulate them in person at the ASCLS-MT Spring Meeting when they will be presenting their poster projects describing research projects.

Advocate.....



Photo Gazette Communications

Miss Iowa is Lab Ambassador

A 2009 Harvard graduate who has been accepted to the University of Iowa Carver School of Medicine, Anne Michael Langguth became the UI Hygienic Laboratory's ambassador to bring awareness about a looming workforce shortage in public health. She has represented the Laboratory at several schools and public events, including the Iowa Academy of Science, the STEM (Science, Technology, Engineering and Mathematics) Open Minds, Open Doors conference and the FIRST Tech Challenge at the UI College of Engineering.

Events where Langguth has appeared include Project Lead the Way, a bioscience and engineering symposium; Iowa Governor's Conference on Public Health; Children's Water Festival; Girl Scouts Go Global and the **Association of Public Health Laboratories' annual meeting.**

<http://www.uhl.uiowa.edu/aboutuhl/news/archive/ambassador/index.xml>

Enlighten....



Medical Laboratory Professionals Week April 18-24, 2010

In its 35th year, National Medical Laboratory Professionals Week (NMLPW) provides the profession with a unique opportunity to increase public understanding of and appreciation for, clinical laboratory personnel.

Building awareness about the laboratory's role in patient care is what Lab Week is all about. After all, 70-80% of the medical decisions that physicians make are based on test results from a laboratory like yours.

Lab Week is your chance to come out from behind the scenes and let people know about your dedication and commitment to your profession and to quality patient care.

NMLPW is coordinated by a collaborative committee of 10 national clinical laboratory organizations:

American Society for Clinical Laboratory Science
American Society for Clinical Pathology
AACC
AABB
American Medical Technologists
American Society of Cytopathology
Association of Public Health Laboratories
CLMA
College of American Pathologists
National Society for Histotechnology

INSPIRE.....

Children with Ideas for
Silly Games and
Serious Science



National Medical Laboratory Week

http://findarticles.com/p/articles/mi_m3230/is_n4_v30/ai_20628444/
or [Medical Laboratory Observer, April, 1998](#)

Empower..



Kids Design Their Own Heroes in 'Spore' spinoff

http://www.usatoday.com/tech/columnist/jinnygudmundsen/2009-10-15-spore-hero_N.htm?csp=

MT Communicable Disease Update as of 01/29/10

This newsletter is produced by the Montana Communicable Disease Epidemiology Program.
Questions regarding its content should be directed to 406.444.0273 (24/7/365).

<http://cdepi.hhs.mt.gov>

DISEASE INFORMATION

Summary – Week 3 – Ending 01/23/10 – Disease reports received at DPHHS during the reporting period – January 17-23, 2010 included the following:

- Vaccine Preventable Diseases: Hepatitis A (1 – in an unvaccinated international traveler), Varicella (4)
- Enteric Diseases: Campylobacteriosis (2), Salmonellosis (1), Shigellosis (1)
- Other Conditions: None
- Travel Related Conditions: None

NOTE: The report has multiple pages reflecting the following information: (1) vaccine preventable and enteric diseases YTD; (2) other communicable diseases YTD; (3) cases just this week; (4) clusters and outbreaks; and (5) an STD summary.

THE “BUZZ”

Influenza

During week 3 (1/23/10), influenza activity continued to decrease in the U.S., with no states reporting widespread activity and 5 states regional activity by 1/23/10. *The southeastern part of the U.S. continues to see regional/local activity.* (<http://www.cdc.gov/flu/weekly/>)

Worldwide, as of 24 January 2010, more than 209 countries and overseas territories or communities have reported laboratory confirmed cases of pandemic influenza H1N1 2009, including at least 14711 deaths. Although much of the temperate northern hemisphere passed a peak of fall and wintertime pandemic influenza activity between late October and late November 2009, virus transmission remain active in several later affected areas, particularly in North Africa, limited areas of eastern and southeastern Europe, and in parts of South and East Asia.

(http://www.who.int/csr/don/2010_01_29/en/index.html)

UPDATE! Activity in Montana – Activity in Montana was lowered to the **SPORADIC** level. There are still cases being reported; however, the number of PCR confirmed cases has dropped significantly. Information on testing can be found at <http://www.dphhs.mt.gov/PHSD/Lab/enviro-lab-index.shtml>. **2009 influenza A (H1N1) continues to predominate - no other subtypes of influenza A are circulating at this time in Montana.**

REPORTING - As the 2009-2010 influenza season progresses, we would like to remind public health officials of the importance of detecting changes in influenza activity across the country.

- **Testing**, including sub-typing of influenza A viruses (i.e, PCR to state) to detect both pandemic and seasonal influenza strains, should continue for all **hospitalized and severely ill patients**, including patients aged >65 years.
- Timely **reporting of all pediatric deaths** associated with laboratory-confirmed influenza remains essential to detecting changes in severity of disease among children.
- **Continued reporting of ILI cases through ILINet (sentinel providers)** will be important to tracking peak influenza activity.
- Health-care providers should continue **reporting to local or state health departments any particularly severe or unusual influenza cases** or cases among specific vulnerable groups, such as pregnant women, immunocompromised persons, and health-care workers.
- **Institutional closings or clusters of influenza** infections in prisons, schools, colleges, and long-term care facilities should also be reported through state and local health departments.
- Any adverse reactions to antiviral medications or to influenza vaccines should continue to be reported via the Vaccine Adverse Event Reporting System.

Changes in the geographic spread, type, and severity of circulating influenza viruses will continue to be monitored with updates reported weekly in the online national influenza surveillance summary, FluView.

Even though influenza incidence is decreasing, influenza is unpredictable and there may be increases in disease again. People who have not been vaccinated should get vaccinated now!

Diarrheal Disease and Food Recalls

NEW! Multistate Outbreak of Human *Salmonella* Montevideo Infections - The CDC and public health officials in many states are currently investigating a multistate outbreak of *Salmonella* serotype Montevideo. As of January 25, 2010, a total of 189 individuals infected with a matching strain (DNA fingerprint) of *Salmonella* Montevideo have been reported from 40 states since July 1, 2009. Preliminary studies involving ill persons from this outbreak have suggested contaminated salami as the source of illness. As a result, this outbreak has prompted the recall of 1,240,000 pounds ready-to-eat Italian sausage varieties by Daniele International Inc. *The product has been distributed in Montana. No Salmonella cases related to this outbreak have been identified in MT as of January, 29th, 2010.* However, cases have been identified in Washington (14), Oregon (8), Idaho (2), Wyoming (2), North Dakota (1), and South Dakota (3), as well as many other western states. For additional information about this outbreak and recall, follow:

<http://www.cdc.gov/salmonella/montevideo/map.html/>

([http://www.fsis.usda.gov/News & Events/Recall 006 2010 Expanded/index.asp](http://www.fsis.usda.gov/News_&_Events/Recall_006_2010_Expanded/index.asp))

E. coli O157:H7 Outbreak and Related Beef Recall - On December 24, 2009, the United States Department of Agriculture's Food Safety and Inspection Service (FSIS) issued a recall notice for 248,000 pounds of beef products from National Steak and Poultry that may be contaminated with *Escherichia coli* O157:H7 (*E. coli* O157:H7). The recall was issued after FSIS determined there was an association between non-intact steaks (blade tenderized prior to further processing) and illnesses in Colorado, Iowa, Kansas, Michigan, South Dakota and Washington. As of Monday, January 4, 2010, 21 persons from 16 states were reported to be infected with the outbreak strain. Illness onset dates ranged from October 3 through December 14, 2009. ***As of January 29, 2010, no reports of E. coli O157:H7 associated with this recall have been received in MT.*** For more information on this outbreak and the associated product recall, go to: <http://www.cdc.gov/ecoli/2010/index.html>.

INFORMATION / ANNOUNCEMENTS

End of Year Surveillance Activities - IMPORTANT!

Communicable Disease Reporting 2009 Reconciliation — CDEpi has begun the process of reconciling 2009 data. Watch for line lists sent via ePASS from Elton Mosher. Please review these line lists to ensure that disease cases that we have match those that are in your records. *Goal is to have this activity completed by March 1, 2010!* Thanks for your assistance!

STD Case Record Reconciliation — Please send in or FAX all remaining 2009 reportable STD case records (chlamydia, gonorrhea, syphilis) to the STD Program. The deadline for sending the case records is February 15, 2010. If you have questions regarding the case records, please contact Cara Murolo at 444-2678 or cmurolo@mt.gov. The STD case records can be FAXed, 800-616-7460, or sent to: DPHHS STD Program, Cogswell Building, Room C-211, Helena, MT 59620

Tuberculosis Testing — The January issue of *Montana Public Health* describes TB cases reported in Montana during the last ten years and TB diagnostic testing available at or through the Montana Public Health Laboratory (MTPHL). It is a particularly good issue to share with clinicians, as it reviews state of the art testing in Montana for tuberculosis. (http://www.dphhs.mt.gov/PHSD/prevention_opps/pdf/MPHJan10.doc)

PBS Program on H1N1 Influenza Epidemic - The Immunization Action Coalition (IAC) has a copy of the video "Anatomy of a Pandemic", a one hour PBS NewsProgram that discusses the science and policy issues related to the 2009 H1N1 influenza pandemic. Go to go to: <http://www.immunize.org> and click on the image under the words Video of the Week. It may take a few moments for the video to begin playing; please be patient!